

PATENT

MS158318.01/MSFTP241US

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**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being faxed to 571-273-8300 on the date shown below to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Date: 8-8-05  
Himanshu S. Amin**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re patent application of:

Applicant(s): John C. Platt, *et al.*

Examiner: Shahid Al Alam

Serial No: 09/870,292

Art Unit: 2162

Filing Date: May 30, 2001

Title: AUTO PLAYLIST GENERATOR

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

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**REPLY TO OFFICE ACTION DATED MAY 17, 2005**

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Dear Sir:

Favorable reconsideration of the above-identified patent application is respectfully requested in view of the amendments and comments below.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**PATENT APPLICATION FEE DETERMINATION RECORD**

Substitute for Form PTO-875

Application Number 9-870492**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	FEE
	<u>395.00</u>
x <u>25</u> =	
x <u>100</u> =	
+ <u>180</u> =	
TOTAL	

RATE	FEE
	<u>790.00</u>
x <u>50</u> =	
x <u>200</u> =	
+ <u>360</u> =	
TOTAL	

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	<u>43</u>	Minus ** <u>31</u>	= <u>12</u>
Independent (37 CFR 1.16(b))	<u>7</u>	Minus *** <u>5</u>	= <u>2</u>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	ADDI- TIONAL FEE
x <u>25</u>	
x <u>100</u>	
+ <u>180</u>	
TOTAL ADD'L FEE	

RATE	ADDI- TIONAL FEE
x <u>50</u>	<u>600</u>
x <u>200</u>	<u>400</u>
+ <u>360</u>	
TOTAL ADD'L FEE	<u>1000</u>

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus **	=
Independent (37 CFR 1.16(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI- TIONAL FEE
<u>25</u>	
x <u>100</u>	
+ <u>180</u>	
TOTAL ADD'L FEE	

RATE	ADDI- TIONAL FEE
x <u>50</u>	
x <u>200</u>	
+ <u>360</u>	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus **	=
Independent (37 CFR 1.16(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI- TIONAL FEE
x <u>25</u>	
x <u>100</u>	
+ <u>180</u>	
TOTAL ADD'L FEE	

RATE	ADDI- TIONAL FEE
x <u>50</u>	
x <u>200</u>	
+ <u>360</u>	
TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.